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MAY 08 2015

CLERK, US DISTRICT COURT  
MINNEAPOLIS, MN

UNITED STATES DISTRICT COURT  
DISTRICT OF MINNESOTA

Plaintiff(s),

vs.

Case No. 15cv2435 DWF/FLN  
(To be assigned by Clerk of District Court)

DEMAND FOR JURY TRIAL

YES  NO

Defendant(s).

(Enter the full name(s) of ALL defendants in this lawsuit. Please attach additional sheets if necessary).

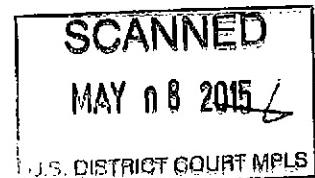
COMPLAINT

PARTIES

1. List your name, address and telephone number. Do the same for any additional plaintiffs.

a. Plaintiff

Name Joshua Thomas Warren  
Street Address 510 Cottonwood Street NE  
County, City Rice, Lonsdale  
State & Zip Code Minnesota, 55046  
Telephone Number 612-432-0279



2. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption.

a. Defendant No. 1

Name Anoka County Attorney

Street Address 2100 3RD Avenue

County, City Anoka, Anoka

State & Zip Code Minnesota, 55303

b. Defendant No. 2

Name Anoka County Sheriff

Street Address 13301 Hanson Blvd NW

County, City Anoka, Andover

State & Zip Code Minnesota, 55304

c. Defendant No. 3

Name Anoka County Court Administration

Street Address 325 East Main Street

County, City Anoka, Anoka

State & Zip Code Minnesota, 55303

**NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES AND ADDRESSES ON A SEPARATE SHEET OF PAPER.**

Check here if additional sheets of paper are attached:

Please label the attached sheets of paper to correspond to the appropriate numbered paragraph above (e.g. Additional Defendants 2.d., 2.e., etc.)

Defendant No. 4

Name: Anoka County Human Services Division

Street Address: 2100 3<sup>rd</sup> Ave Suite 401

County, City: Anoka, Anoka

State & Zip Code: Minnesota, 55303

Defendant No. 5

Name: Minnesota Department of Human Services - Child Support Division

Street Address: PO Box 64946

County, City: Ramsey, St. Paul

State & Zip Code: Minnesota, 55164

## JURISDICTION

Federal courts are courts of limited jurisdiction. Generally, two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount of damages is more than \$75,000 is a diversity of citizenship case.

3. What is the basis for federal court jurisdiction? (*check all that apply*)

Federal Question

Diversity of Citizenship

4. If the basis for jurisdiction is Federal Question, which Federal Constitutional, statutory or treaty right is at issue? List all that apply.

Fourth Amendment of the U.S. Constitution  
Sixth Amendment of the U.S. Constitution

5. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party? Each Plaintiff must be diverse from each Defendant for diversity jurisdiction.

Plaintiff Name:

State of Citizenship:

Defendant No. 1:

State of Citizenship:

Defendant No. 2:

State of Citizenship:

**Attach additional sheets of paper as necessary and label this information as paragraph 5.**

**Check here if additional sheets of paper are attached.**

6. What is the basis for venue in the District of Minnesota? (*check all that apply*)

Defendant(s) reside in Minnesota  Facts alleged below primarily occurred in Minnesota

Other: explain

## STATEMENT OF THE CLAIM

Describe in the space provided below the basic facts of your claim. The description of facts should include a specific explanation of how, where, and when each of the defendants named in the caption violated the law, and how you were harmed. Each paragraph must be numbered

separately, beginning with number 7. Please write each single set of circumstances in a separately numbered paragraph. See attached

7.

Attach additional sheets of paper as necessary.

Check here if additional sheets of paper are attached:

Please label the attached sheets of paper to as Additional Facts and continue to number the paragraphs consecutively.

#### REQUEST FOR RELIEF

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking.

1. I would like the conviction expunged and any records relating to said arrest deleted, including personal information, fingerprints, photos, or any other material associated with this case.
2. I would like compensation of my hourly wage of \$14.49 per hour for each hour I was incarcerated, totalling \$521.64
3. I would like punitive compensation of the same amount of \$521.64, plus deletion of any child support arrearages on my credit report as well as paying those obligations tax free to my children's mother or other agencies as applicable.
4. I'd like the defendants be required to pay for any mug shot removal from the internet as a result of the aforementioned case.

7.

Defendant number 1.

The Anoka County Attorney's office applied for and was granted an arrest warrant in 2012, based on plaintiff's failure to pay child support. Plaintiff was arrested on this contempt of court charge in January of 2013. Plaintiff posted bail after two days and three nights of incarceration and was subsequently released on conditions which were upheld by the plaintiff. Upon a Motion to Modify Child Support, plaintiff was again arrested on the same warrant in June of 2013, even though plaintiff was current on his child support obligation. The County Attorney's office knew the plaintiff was current on obligation per wage withholding through employment, yet had Sheriff's Office still arrest plaintiff in courthouse. Upon hearing date, Anoka County Attorney claimed a "clerical error" and that there was no evidence proving the validity of the warrant or incarceration.

8.

Defendant Number 2.

The Anoka County Sheriff's Office incarcerated the plaintiff in the courthouse on a Motion to Modify Child Support on an invalid warrant. All cash plaintiff had on hand was seized for "booking fees". Plaintiff was incarcerated for from 10am one day until almost 6pm the following day, around 36 hours, even after plaintiff's hearing at 8am, when plaintiff was to be released upon his own recognizance, it took Sheriff's Office Staff almost 10 hours to release the plaintiff from custody. Plaintiff was searched without cause. Sheriff's Department staff also forced incarcerated individuals to apply for a Public Defender, without alerting individuals they may have to pay copayments on services.

9.

Defendant Number 3.

Anoka County Court Administration did not vacate original warrant when on the Motion to Modify Child Support, that plaintiff had been paying on-time payment per wage withholding. Court Administrators, upon hearing of the wrongful incarceration, also refused to reimburse Public Defender copayment fees assessed by the Court, subsequently sending the unpaid fees to collections at the Minnesota Department of Revenue.

10.

Defendant Number 4.

Anoka County Department of Human Services failed to update monetary amounts paid by the plaintiff through wage withholdings for child support, directly resulting in plaintiff's incarceration and warrant not being vacated.

11.

Defendant Number 5.

Minnesota Department of Human Services- Child Support Division failed to update monetary amounts paid by the plaintiff through wage withholdings for child support, directly resulting in plaintiff's incarceration and warrant not being vacated.

Signed this 25<sup>th</sup> day of March 2015

Signature of Plaintiff

Mailing Address

510 cottonwood Street NE  
Lonsdale, MN 55046

Telephone Number

612-432-0279

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide his/her mailing address and telephone number. Attach additional sheets of paper as necessary.